

PTO/SB/22 (04-07)

Approved for use through 09/30/2007. OMB 0651-0031

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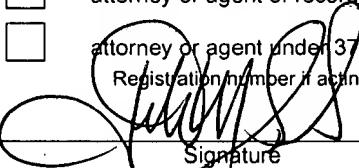
|   |   |   |
|---|---|---|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2006</b><br><b>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</b> |   | Docket Number (Optional)<br>55793DIV(48340) |
| Application Number  | 09/774,681-Conf. #3045  | Filed February 1, 2001                      |
| For   | RECOMBINANT CONSTRUCTS ENCODING T CELL RECEPTORS SPECIFIC FOR HUMAN HLA-RESTRICTED TUMOR ANTIGENS |   |
| Art Unit  | 1644  | Examiner R. B. Schwadron                    |

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

|  | <u>Fee</u> | <u>Small Entity Fee</u> |           |
|--|------------|-------------------------|-----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))               | \$120      | \$60                    | \$ _____  |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))              | \$450      | \$225                   | \$ _____  |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020     | \$510                   | \$ 510.00 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))             | \$1590     | \$795                   | \$ _____  |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))             | \$2160     | \$1080                  | \$ _____  |

- Applicant claims small entity status. See 37 CFR 1.27.
- A check in the amount of the fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Director has already been authorized to charge fees in this application to a Deposit Account.
- The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-1105. I have enclosed a duplicate copy of this sheet.

I am the  applicant/inventor.  
 assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
 attorney or agent of record. Registration Number 53,624  
 attorney or agent under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34  
\_\_\_\_\_  


September 10, 2007

Date

(617) 239-0100

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

09/12/2007 HUUONG1 00000027 041105 09774681

01 FC:2253 510.00 DA



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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL For FY 2007

Applicant claims small entity status. See 37 CFR 1.27

|                                |      |        |
|--------------------------------|------|--------|
| <b>TOTAL AMOUNT OF PAYMENT</b> | (\$) | 510.00 |
|--------------------------------|------|--------|

|  |  |                                     |
|--|--|-------------------------------------|
|  |  | Attorney Docket No. 55793DIV(48340) |
|--|--|-------------------------------------|

**Complete if Known**

|                      |                        |
|----------------------|------------------------|
| Application Number   | 09/774,681-Conf. #3045 |
| Filing Date          | February 1, 2001       |
| First Named Inventor | Linda A. Sherman       |
| Examiner Name        | R. B. Schwadron        |
| Art Unit             | 1644                   |

**METHOD OF PAYMENT** (check all that apply)

Check    Credit Card    Money Order    None    Other (please identify): \_\_\_\_\_

Deposit Account   Deposit Account Number: 04-1105   Deposit Account Name: Edwards Angell Palmer & Dodge LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below    Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17    Credit any overpayments

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| <b>Application Type</b> | <b>FILING FEES</b> |                              | <b>SEARCH FEES</b> |                              | <b>EXAMINATION FEES</b> |                              | <b>Fees Paid (\$)</b> |
|-------------------------|--------------------|------------------------------|--------------------|------------------------------|-------------------------|------------------------------|-----------------------|
|                         | <b>Fee (\$)</b>    | <b>Small Entity Fee (\$)</b> | <b>Fee (\$)</b>    | <b>Small Entity Fee (\$)</b> | <b>Fee (\$)</b>         | <b>Small Entity Fee (\$)</b> |                       |
| Utility                 | 300                | 150                          | 500                | 250                          | 200                     | 100                          |                       |
| Design                  | 200                | 100                          | 100                | 50                           | 130                     | 65                           |                       |
| Plant                   | 200                | 100                          | 300                | 150                          | 160                     | 80                           |                       |
| Reissue                 | 300                | 150                          | 500                | 250                          | 600                     | 300                          |                       |
| Provisional             | 200                | 100                          | 0                  | 0                            | 0                       | 0                            |                       |

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

| <b>Fee (\$)</b> | <b>Small Entity Fee (\$)</b> |
|-----------------|------------------------------|
| 50              | 25                           |
| 200             | 100                          |
| 360             | 180                          |

Each independent claim over 3 (including Reissues)

Multiple dependent claims

| <b>Total Claims</b>   | <b>Extra Claims</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> | <b>Multiple Dependent Claims</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> |
|---|---------------------|-----------------|----------------------|----------------------------------|-----------------|----------------------|
| - 20 =  | x                   | =               |                      |                                  |                 |                      |
| HP = highest number of total claims paid for, if greater than 20. |                     |                 |                      |                                  |                 |                      |

**Indep. Claims**   **Extra Claims**   **Fee (\$)**   **Fee Paid (\$)**

- 3 =   x   =

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

|                     |                     |   |                 |                      |
|---------------------|---------------------|---|-----------------|----------------------|
| <b>Total Sheets</b> | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> |
| - 100 =             | /50 =               | (round up to a whole number) x                          | =               |                      |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 2253 Extension for response within third month

510.00

| <b>SUBMITTED BY</b> |                           | <b>Registration No.<br/>(Attorney/Agent)</b> | <b>Telephone</b>   |
|---------------------|---------------------------|--|--------------------|
| Signature           |                           | 53,624                                       | (617) 239-0100     |
| Name (Print/Type)   | Jonathan M. Sparks, Ph.D. | Date   | September 10, 2007 |